SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:

Bayfield County Planning and Zoning Depart. PO Box 58 Washburn, WI 54891 (715) 373-6138

Date Stamp (Ruse Entra Contractor (a) 17 2013 4 Wallery

SEP

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

INSTRUCTIONS: No permits will be issued until all fees are paid. Checks are made payable to: Bayfield County Zoning Department. DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN IS

Refund:	Amount Paid:	Date:	Permit #:
	\$75 9-17-13	9-23-13	13 63 6MI

Secretarial Staff FAILURE TO OBTAIN A PERMIT OF		400000000000000000000000000000000000000		Rec'd for Issuance		25. 25. 25. 26.			☐ Commercial Use				✓ Residential Use			Proposed Use		Existing Structure: (in permit being applied for is relevant to it) Proposed Construction:	T () + 1				18,000	s	×	Value at Time of Completion * include donated time & material (W	Non-Shoreland		☐ Shoreland —▼ ☐		Section 14	N 1/2 N N 1/5 N	TION		Authorized Agent: (Person Signing Application on behalf of Owner(s))	Contractor	35225	Address of Property:	Owner's Name:	TYPE OF PERMIT REQUESTED
FAILURE TO	_		Special II	Accessor		<u>'</u>	☐ Mobile H	☐ Bunkhou	O					+	Principal			r permit being applied to		Management Agreement Street	Property	Run a Business on	Conversion Reforate (existing hide)	Addition/Alteration	New Construction	Project (What are you applying for)		Is Property/Land within 1000 leet of Lake,	Creek or Landward side of Floodplain:	Is Property/Land within 300 feet of River, Stream (Inc. Intermittent)	, Township 50 N, Range	1/4	escription:		ո Signing Application on behalt	E SHAK	WHITETHI	Toleca		₩
	Other: (explain)	Special Ose: (explain)	se (explain)	Accessory Building Addition/Alteration (specify)	Accessory Building (specify)	=	Mobile Home (manufactured date)	Bunkhouse w/ (\square sanitary, or \square sleeping quarters,	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	with Loft	Principal Structure (first structure on property) Residence (i.e. cabin, bunting shack, etc.)	<u> </u>		r is relevant to it)			☐ Foundation	- 1	X 2-Story	⊾î .	1-Story	# of Stories and/or basement	Minde de la companya	I 1000 leet of Lake, For		300 feet of River, Stream	I, Range 4 W	8	Gov't Lot Lot(s) CSM			P Jes	LAVE. B.	City/State	·	LAND USE 🗆 SANITARY
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Owner(s): XIIMO

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must sign or letter(s) of authorization must accompany this application)

Authorized Agent:

(If you are signing on behalf of the ov

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SHBY Copy of Tax Statement
tly purchased the property send your Recorded Deed

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Address to send permit _

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Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN

Dare Stamp (Received)

Bayfield Co. Zoning Dept. 520

> Permit #: Refund: Date: Amount Paid: 15 K 8-15-13 \$250 \$250 \$

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INSTRUCTIONS: No permits will be issued until all fees are paid. ### Application with the instruction will be issued until all fees are paid. #### #### ##########################	1 1 1 1 1 1 1 1 1 1					[-	r Torré	ivied Co Zonin	paid. S	intil all fees are	be issued u	UCTIONS: No permits will

his application)

Owner(s): Sallie H. MacGTeco Lalle a Manual (If there are Multiple Owners listed on the Deed All Owners haust sign or letter(s) of authorization must accompany

-	uthorized Agent: _
(If you are signing on behalf of the owner(s) a letter of authorization must accompany this application)	The state of the s

Address to send permit 690 Grand Tetor Circle Fayetteville

Date

SODIS Copy of Tax Statement your recently purchased the property send your Recorded Deed

Please complete (1) - (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

Setback from the North Lot Line
Setback from the South Lot Line
Setback from the West Lot Line
Setback from the East Lot Line Setback to Septic Tank or Holding Tank
Setback to Drain Field Setback from the Centerline of Platted Road Setback from the Established Right-of-Way (8) Setbacks: (measured to the closest point) Description Measurement Feet Feet Feet Feet Feet Setback from Wetland
Setback from 20% Slope Area
Elevation of Floodplain Setback from the Lake (ordinary high-water mark)
Setback from the River, Stream, Creek
Setback from the Bank or Bluff Setback to Well Measurement

Feet

Feet

to the

Feet Feet Feet

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense. Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W)

(9)

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun. For The Construction Of New One & Two Family Dwelling: <u>ALL</u> Municipalities Are Required To Enforce The Uniform Dwelling Code The local Town, Village, City, State or Federal agencies may also require permits

	Sanitary Number:	# of bedrooms:	Sanitary Date:	
Issuance Information (County Use Only)	January Maribert			
Permit Denied (Date):	Reason for Denial:			
Permit#/2038	Permit Date: 9-23-13			
S Parcel a Sub-Standard Lot Yes (Deed of Record) S Parcel in Common Ownership Yes (Fused/Contiguous Lot(s)) S Structure Non-Conforming Yes Yes	ord) X,No Mitigation Required Mitigation Attached Mit	□YES XNO	Affidavit Required Affidavit Attached	□Yes Ano
Granted by Variance (B.O.A.) Granted by Variance (B.O.A.) Case #: NP		Previously Granted by Variance (B.O.A.) □ Yes □ No Case	* スキ	
Was Parcel Legally Created A Yes □ No Was Proposed Building Site Delineated XYes □ No □		Were Property Lines Represented by Owner Was Property Surveyed	∆Yes	X □ No
Inspection Regard: SHOWELINE SELMENT 134 (NA)	(+ 134 (HA)		Zoning District (R・2 号) Lakes Classification(といろ幻	(R.R.R.)
Date of Inspection: 0 7 7	Inspected by: Caron Province War and Caron	Windy /	Date of Re-Inspection:	noi:
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	Hold For Affidavit	Hold For Fees:		
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> BAYFIELD COUNTY, WISCONSIN APPLICATION FOR PERMIT

Date Stamp (Received) JE.

Bayliald Co. Zoning Dept SEP --> 2013

> Permit #WEALU Refund: Date: Amount Paid 13 day 9-23-7 W

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DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zo

Secretarial Staff		ST 302	Rec'd for Issuance		☐ Municipal Use			Commercial Use				✓ Residential Use			Proposed Use	Proposed Construction:	Existing Structure:				2000	Τ.	T	Value at Time of Completion * include donated time & material	XNon-Shoreland	Silvi elallu —	-314	Section 1	Section 22	N W1/4, 5w	PROJECT LOCATION	Leo Ket		84/70 Ht	Address of Property:	Owner's Name:
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Other: (explain)	(explain)	Special Use: (explain)		Accessory Building Addition/Alteration	Accessory Building (specify)		Bunkhouse w/ (☐ sanitary, or	with Attached Garage	with (2 nd) Deck	with a Deck	with (2 nd) Porch	with a Porch	nce (i.e. cabin, hunting shack,	truct			I for is relevant to it)	_ x slab	☐ Foundation	☐ Basement) 		□ 1-Story	# of Stories and/or basement		thin 1000 feet of Lake, P	liver,		N Range OY W	Gov't Lot Lot(s)	(Use Tax Statement) 04-					M. Stire W. ING
STARTING CONSTRUCTION WITHOUT A)	***************************************		/Alteration (specify)	4.01.67		leeping quarters,	irage		A server and a server a server and a server	Name of the latest and the latest an		g snack, etc.)	ucture on property)	Proposed Structure		Length: 4)					y² Year Round	☐ Seasonal	Use		Pond or Flowage If yescontinue —	Stream (ind. Intermittent) If yescontinue	Bayta	Town of:	CSIM Vol & Page	PIN: (23 digits) 04-006-2-50-04-	715-209-0300 6	6	Clar	PoBox 904 City/State/Zip:	realing Audiess.
CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES	N 57				Kanta land	Wed to set heart	or a cooking &								6				and the same and t	□ None	3			# of bedrooms		Distance Structure	Distance Structure	210		Lot(s) No.	1-22-3 02	GRUHTS.	Plumber:	5	traco	
WILL RESULT IN PER						7.7.5	<u>or</u> □ cooking & food prep facilities)									Width: /4	CS. :HtpiW	□ None	□ Compost Toilet	Privy (Pit) or Valited (I		☐ (New) Sanitary		Sew Is		ture is from Shoreline :	ture is from Shoreline : fee			Block(s) No.	-000 Dao	old mitth St. Was Worm mil		H84	Chire, W.	city) state) alp:
VALTIES	1	-		(~ -	}	s)		_	^	^	_	_ -				•		ilet	v/service con	· ŧ		Tity	What Typ Sewer/Sanitar Is on the pro		eline : feet	eline : feet	***************************************	Lot Size	Subdivisio	Récorded Volume_	Lare/Libi-	77:)		54	
X)		× ×		×)	X	, m × h	< ×	×	×	×	×)	x ;	× ×	×	Dimensions	Height:	Height: 28	emandeministration of the company of		ontract)	city Type:	cify Type:		What Type of er/Sanitary System on the property?		□ Yes	Is Property in Floodplain Zone?	58	Acr	ion:					70al (175) with	<u> </u>
×) 460					1 Cope Cin	19/ 1									Square Footage	🕶	8			alion)		+	☐ City	Water		□ Yes	Are P	<u> </u>	Acreage		Document: (i.e. Property Ownership)	Attached Yes No	Plumber Phone:		And There is a second of the s	Telephone:

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

Authorized Agent:

(If you ar

behalf of the owner(s) a

letter of

authorization must accompany this application)

Street

E

5

Myou recently purchased the property send your Recorded Deed

Con

Address to send permit

612

west

Owner(s): See letter of Atho Ratio (If there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Date

Please complete (1) - (7) above (prior to continuing)

Setbacks: (measured to the closest point)

Changes in plans must be approved by the Planning & Zoming Dept.

Description	Measurement	=	Pescription	Medanienie
		2.550		
Setback from the Centerline of Platted Road	v D	Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	, (Feet	Setback from the River, Stream, Creek	Feet
			Setback from the Bank or Bluff	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
Setback from the North Lot Line	S	Feet		
Setback from the South Lot Line	力のも	Feet	Setback from Wetland)
Setback from the West Lot Line	٠ د (Feet	Setback from 20% Slope Area	1
Setback from the East Lot Line	000	Feet	Elevation of Floodplain)
A COLOR OF THE PARTY OF THE PAR		Y1433		
Setback to Septic Tank or Holding Tank	15	Feet	Setback to Well	3 ○ Feet
Setback to Drain Field		Feet		
Setback to Privy (Portable, Composting))	Feet		
Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be other previously surveyed corner or marked by a licensed surveyor at the owner's expense.	of the minimum required e owner's expense.	setback, the	oundary line from which the setback must be measured must be visible from one	visible fram one previously surveyed carner to the
Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Setback from the Established Right-of-Way Feet Setback from the River, Stream, Creek Setback from the Bank or Bluff Setback from the Bank or Bluff Setback from the South Lot Line Setback from the South Lot Line Setback from the West Lot Line Setback from the Established Right-of-Way Feet Setback from Wetland Setback from Wetland Setback from Wetland Setback from Wetland Setback from the East Lot Line Setback from the Bank or Bluff Feet Setback from Wetland Setback from Wetland Setback from Wetland Setback from Top Slope Area Setback from the East Lot Line Feet Setback from Wetland Setback from Top Slope Area Setback from Wetland Feet Setback from Wetland Setback from Wetland Feet Setback from Wetlan	GIS SG4 SG4 SG4 SG4 SG4 SG4 SG4	Feet Feet Feet Feet Feet Feet Feet Feet	Setback from the Centerline of Platted Road Setback from the Established Right-of-Way Setback from the Established Right-of-Way Setback from the River, Stream, Creek Setback from the River, Stream, Creek Setback from the Bank or Bluff Setback from the East Lot Line Setback from Wetland Setback to Privy (Portable, Compositing) Feet Setback from the East Lot Line Setback to Privy (Portable, Compositing) Feet Setback to Privy (Portable, Compositing) Feet Setback from Wetland Setback to Privy (Portable, Compositing) Feet Setback to Privy (Portable, Compositing) Feet Setback from the East Lot Line Setback from Wetland Setback from Wetland Setback fro	previously surveyed corner previously surveyed corner previously surveyed corner presured must be visible fit

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

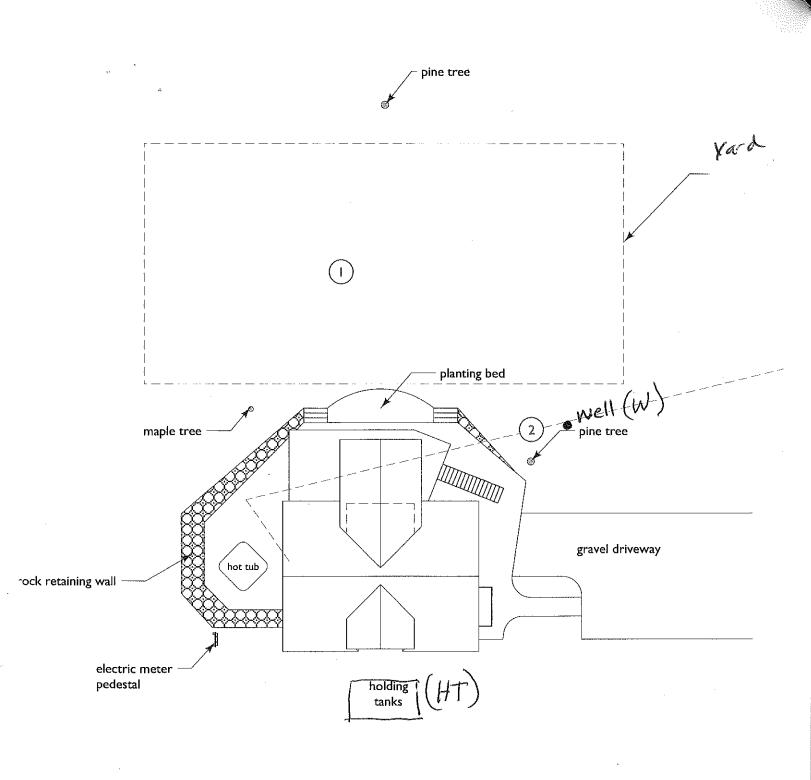
NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

For The Construction Of New One & Two Family Dwelling: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code

The local Town, Village, City, State or Federal agencies may also require permits.

To T

Hold For Sanitary: Hold For Affidavit:	Signature of Inspector:	Date of Inspection: 9 29 3 Inspected by: 1. CROMITME . I Condition(s):Town, Committee or Board Conditions Attached? 1. Yes ANO-(If No they need to be attached.)	Was Proposed Building Site Delineated X ves No Were Property Lines Represeives Proposed Building Site Delineated X ves No Was Proposed Building Site Delineated X ves No Was Proposed To	Granted by Variance (B.O.A.) □ Yes □ No Case #:	Is Parcel a Sub-Standard Lot	Permit # 13 - 0336 Permit # 13 - 0336 Permit Date: 9-30-13	tion (County Use Only) Sanitary Numb	The local Town, Village, City, State or F-
avit: [] Hold For Fees; []	Date of Approval: 9. 12.13	JA DHY Dat	Were Property Lines Represented by Owner Xves <u>Quth. agent DNo</u> Was Property Surveyed DYes <u>XNo</u> PART FULCUITS Zoning District (RIB) Lakes Classification (NA)	Previously Granted by Variance (B.O.A.) ☐ Yes ☐ No Case #:	Mitigation Required ☐ Yes Ano Affidavit Required ☐ Yes Ano Mitigation Attached ☐ Yes Ano Affidavit Attached ☐ Yes Ano	13 From KATE toogo	er: 282774/3750 # of bedrooms: Sanitary Date: 10-23-96	The local Town, Village, City, State or Federal agencies may also require permits. House: 46-5720



SITE PLAN I" = 20 ft NA

SÜBMIT: <u>COMPLETED</u> APPLICATION, TAX STATEMENT AND FEE TO: Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT

Date Slamp (Received) 18 2013

Coning Dept.

> Amount Paris Permit #: Refund: Date: Co. 20 30 0 1-8-W

INSTRUCTIONS: No permits will be issued until all fees are paid.

Checks are made payable to: Bayfield County Zoning Department.

DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO

HOW DO I FILL OUT THIS APPLICATION (visit our website www.bayfieldcounty.org/zoning/asp)

×							_	これにエンジュー
	7			14) 140 C	plain)	Other: (explain)		Sporpharial Staff
	- -		CONTRACTOR OF THE PROPERTY OF		Special Use: (explain)	Special Use: (explain)		% 30 203
	-			and the state of t	The second of th	The state of the s		nec a lor issuance
		**************************************		Alteration (specify)	>	Accessory		Doo'd for Inner
		A STATE OF THE STA		I 1		Accessory Building	□ f	☐ Municipal Use
			Janoh	50 rae 2	Mobile Home (manufactured date) Addition/Alteration (specify)	Mobile Ho	Ž	
		k food prep facilities)	<u>or</u> □ cooking &	☐ sleeping quarters, <u>or</u>	Bunkhouse w/ (☐ sanitary, or [Bunkhous		
	_			rage	with Attached Garage			☐ Commercial Use
					with (2 nd) Deck			
	_		i		with a Deck			
	+				with (2 nd) Porch			
	1				with Loft			Posidential IIso
			- The state of the	shack, etc.)	Residence (i.e. cabin, hunting shack, etc.)	Residence		
	Dimensions		ò	Proposed Structure	trint it is	Dringing! 6] <	Proposed Use
				Q				
		Width: 22		Length: 스시	for is relevant to it)	ng applied for	ermit bei	Existing Structure: (If permit being applied Proposed Construction:
1 1		اار	a Later				A1000000000000000000000000000000000000	
	liet.	□ Compost roller	1 8		Coningitor		Flobelty	
۱Ď	service co	- 1	None /	The state of the s	1	ness on	Run a Business	□ Ru
드	or U Vaulted (min 200 gallon)	- 1			1	Relocate (existing bldg)	locate (Rel
14	i sts) Sper	ৰ Sanitary (Exists) Specify Type: Hতে যোগ্য Tark	1		2-Story	3	☐ Conversion	\$
ぎし	ary Specify Type:			- 1'	-	Addition/Alteration	dition/	
	ř.	☐ Municipal/City	□ 1	⊠ Seasonal	₹ 1-Story	New Construction	Cons	iliateriai
pe of iry System operty?	What Type of Sewer/Sanitary Syste Is on the property?	Sewi	# of bedrooms	Use	# of Stories and/or basement	Project (What are you applying for)	Project	me ion e &
1 1								贞Non-Shoreland
□ Yes	eline : feet	Distance Structure is from Shoreline : fee	Distance Stru	Pond or Flowage If yescontinue>	☐ Is Property/Land within 1000 feet of Lake, Pond or Flowage If yescontinue	//Land within	Property	☐ Shoreland — ☐ Is
	eline : feet	icture is from Shoreline :	Distance Structure	Stream (incl. Intermittent) If yescontinue —	liver,	☐ Is Property/Land within 300 feet of F Creek or Landward side of Floodplain?	Property ek or Lan	
	Lot Size)	NEUR	Town of:	N, Range C3 W	SON	, Township	Section Ob.
, U	EXPANDAGE CENDEMINION	Block(s) No.	Cot(s) No.	M Vol & Page	Lot Lot(s) CSM	Gov't Lot	1/4	1/4,
eV=	Volume 和安安 Page(s) 经分	ہٰ غہا	19 4	or And (sugn	tatement)	(Use	Legal Description:	PROJECT Lega
120	City/State/Zip): W/1分れるいない。	1 #	Agent Mailing Add	Agent Phone: A		(Person Signing Application on behalf of Owner(s)) W れんらけ	gning Appl	Authorized Agent: (Person Signin
			Plumber: へり	6415	2/0	vuices	32 3	tractor:
		54814	WI S	BAYFIEW)	Ø €	5		87805 OCIVIA
َ عـا	0 7 S	2 2 2 C 4 C C C	AVES:	MRIET	LEWIS 38	KATILLEGY	ナズミ	5

Owner(s): (If there are Multiple Owners listed on the De

 $\frac{d}{h}$ Owners must sign or letter(s) of authorization must accompany this application)

MIKE Winglet: (If you are signing on behalf of the Address to send permit 116 F. Z

1

r(s) a letter of auto

zation must acco

npany this application)

Date

Date

TO I

Copy of Tax Statement
purchased the property send your Recorded Deed

Authorized Agent:

